Town of Purcellville

Are you currently on "lay-off" status and subject to recall?

APPLICATION FOR EMPLOYMENT TOWN OF PURCELLVILLE

221 South Nursery Avenue, Purcellville, VA 20132 **PHONE**: (540) 338-7421 **FAX**: (540) 338-6205

Web Site: http://town.purcellville.va.us/

☐ Yes

☐ No

AN EQUAL OPPORTUNITY EMPLOYER:

Under the provisions of the Americans with Disability Act (ADA) reasonable accommodation will be made during the selection process for this job upon your request. The Town of Purcellville considers all applicants without regard to gender, race, religion, color, creed, age, disability, national origin, marital or veteran status, or any other legally protected status.

Position(s) Applied For Date of Application How did you learn about us? Web Page Friend or Relative Inquiry Newspaper Ad Employment Agency Other Last Name First Name Middle Name Address Number Street City State Zip Code Telephone Number E-Mail Address Social Security Number (voluntary information) When can we best reach you at home?						
□ Web Page □ Friend or Relative □ Inquiry □ Newspaper Ad □ Employment Agency □ Other Last Name First Name Middle Name Address Number Street City State Zip Code Telephone Number E-Mail Address Social Security Number (voluntary information) When can we best reach you at home? am						
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If you are under the age of 18 can you provide the required proof of your eligibility to work? ☐ Yes ☐ No						
Have you ever filled out an application with the Town of Purcellville before? ☐ Yes ☐ No						
If Yes, please give the date of your application						
Have you ever been employed with the Town of Purcellville before? ☐ Yes ☐ No						
If Yes, please give the date of your employment						
Do any of your relatives, other than spouses, or friends work for the Town of Purcellville?						
If Yes, state name and relationship Are you currently employed? Yes No						
If Yes, may we contact your current employer?						
The contract year current employee.						
Have you ever been fired or resigned from a position after being notified you would be fired? (If Yes, explain)						
For the purpose of compliance with the United States Immigration and Nationalization Act, and						
Section 40.1-11.1 of the Code of Virginia, are you legally eligible for employment in the United						
States? Proof of citizenship or immigration states will be required upon employment.						
Date You Are Available for Work / / What is your desired salary range?						
Are you available: Do you have a valid driver's license?						
☐ Full Time (Circle shift 1 2 3) Please list the Number / State / Expiration Date:						
Part Time (Circle Morning Afternoon Evening)						
☐ Temporary (List dates available / /) Can you travel if the job requires it? ☐ Yes ☐ No						

EDUCATION

School	Name and Location of School	Dates of Enrollment	Degree or # Credits Completed	Date Graduated	Major Area of Study
High School or Highest Grade Completed					
College or University					
Graduate or Professional School					
Business or Trade School					
Other (specify)					

If you expect to complete an educational program in the near future, please indicate what type of degree you are pursuing and when you expect to receive it:_____

WORK EXPERIENCE

List below present and past employment, beginning with the most recent. Include any related military service or volunteer work. If appropriate, list number and title of employees you supervised in each position. You may attach a resume as supplemental information, you may also use additional sheets as necessary, please put your name and the title of the position for which you are applying on each sheet.

may also use additional sheets as necessar	ary, please put	your name and	the title of the	e position for v	vhich you are app	olying on each sheet.	
Name 9 Address of France or	From	To	Starting	Ending	# of Hours	Reason for Leaving	
Name & Address of Employer	Mo./Yr.	Mo./Yr.	Salary	Salary	per week		
	Position Title:						
	Description of work:						
Supervisor's Name/Telephone	1						
	From	То	Starting	Ending	# of Hours	Reason for Leaving	
Name & Address of Employer	Mo./Yr.	Mo./Yr.	Salary	Salary	per week		
	D 10 T0		<u> </u>	<u></u>			
	Position Title	:					
	Description of work:						
Supervisor's Name/Telephone							
_	From	То	Starting	Ending	# of Hours	Reason for Leaving	
Name & Address of Employer	Mo./Yr.	Mo./Yr.	Salary	Salary	per week		
	Position Title	!	1	-		1	
	a statements trainer						
	Description of work:						
Supervisor's Name/Telephone	1						
	From	То	Starting	Ending	# of Hours	Reason for Leaving	
Name & Address of Employer	Mo./Yr.	Mo./Yr.	Salary	Salary	per week		
	Position Title:						
	T COMMON TIME.						
	Description of work:						
Supervisor's Name/Telephone							

Please explain any gaps in employment							
Awards or Certifications		Languages					
Specialized training, apprenticeship and/or skills and abilities received in the United States military or elsewhere							
Professional, trade, business, or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, or other professed status.							
Special Skills and Abilities Computer Skills Office Sk Mac / PC Spreadsheet Word Processing Databases Additional information you feel may be helpful to	Typewriter (WPM) Short Hand Dictation Other	Production / Mobile Machinery (list)	Other (list)				
PERSONAL OR PROFESSIONAL REFERENCES (Please do not include family members or past supervisors) Name Best Time to Call Relationship							
1.							
2.							
3.							
I certify that the statements in this application are true and complete to the best of my knowledge, and I agree that any intentional misstatement or omission will constitute grounds for unfavorable consideration of my application or dismissal from employment with the Town of Purcellville.							
2) I authorize the Town of Purcellville to obtain information from past employers and other sources to support the data on this application, including a review of my educational, criminal and credit records, as appropriate. 2) This application and the standard of the standard							
 This employment application shall be considered active for a period of time not to exceed 45 days. Applicants wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Town of Purcellville is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. I further understand that this "at will" relationship with my employer may not be changed by any written document or by conduct unless an authorized executive of the Town of Purcellville specifically acknowledges such a change in writing. 							
5) I understand that I am required to abide by all rules and regulations of the employer.							
Applicant's Signature Date							